

REMARKS

Claims 1-3, 7, 10-14, and 20 are amended.

Claims 8-9 and 18-19 are withdrawn.

Claims 1-7, 10-18 and 20 remain in the case.

The specification has been amended to include the medical definition of “frontal plane”. No new matter has been added. Other medical definitions can be added to the specification if the Examiner finds it helpful or appropriate.

The specification was objected to as failing to provide proper antecedent basis for the claimed subject matter. The Examiner states that correction of the following is required: Claims 11-13 recite the limitation “a forefront area of a sole of the foot” in line 6 and 13, although the specification recites on page 5, line 22, “the sole of the patient’s foot” not “a forefront area.” Claims 11-13 have now been amended to replace the term forefront area to forefoot area. The term “forefoot” is in the specification on page 8, line 18 and page 13, lines 4-7 and 23-25.

Claims 11-14 and 20 were objected to in that the Examiner states that the spelling of certain words should be consistent and in the British spelling. The claims have now been amended as suggested by the Examiner.

Claim 1, 11-13 and 15 were rejected Under 35 U.S.C. 103(a) as being unpatentable over Stevens, U.S. Patent No. 3,020,909 (‘909). The Examiner states that Stevens discloses a limb supporting device which includes a member having a planar surface on one side and operating means (Fig. 2, set screw 60) provided on the opposite side of the member to the planar surface the operating means further providing means for tilting the member (column 4, line 31, 32) while the planar surface is in contact with the foot sole (Fig. 9).

The rejection of Claim 1 is traversed. However, claim 1 has been amended to require the operating means having means for inverting and everting the planar surface of the member for inverting and everting the foot. Stevens does not show or disclose the operating means having means for inverting and everting the planar surface of the member while the planar surface is in contact with the at least portion of the sole for inverting and everting the foot. The terms inverting and everting (or inversion and eversion) are medical terms referring to the foot or

the eyes and meaning movement of turning the foot or eyes inward toward the midline or outward away from the midline, respectively. The movement of inversion and eversion is shown in the Appendix A on page B2, of an excerpt from Stedman's Medical Dictionary, 27th Edition. Stevens discloses a rotation of the entire leg and foot. The whole leg rotation is not an inversion or eversion movement as described in medical terms and claimed in claim 1. Therefore, claim 1 is believed to be allowable over Stevens '909.

The rejection of Claim 11 is also traversed. Stevens does not show or disclose operating means for tilting the member about a vertical axis in a frontal plane of the foot while the planar surface is in contact with the forefoot area of the foot sole. The term "frontal plane" is a bio-mechanical term and is the longitudinal plane made by cutting lengthwise from side to side through the head and body or body part along the coronal suture of the skull or parallel to it. The frontal plane is at right angles to the sagittal plane. This definition of a frontal plane has also been added to the specification. Excerpts from Stedman's Medical Dictionary 27th Edition is attached (Appendix A) providing definitions for the frontal or coronal plane, the sagittal plane, eversion, and inversion. An important aspect of the invention is the means for tilting in the frontal plane while or when the planar surface of the member is in contact with the forefoot area of the sole. In contrast, the principal function of Stevens is supporting the leg, post-fracture, to enable correct rotation of the leg. The Stevens device includes a traction attachment 46 which is provided for stabilization of the foot. The traction unit includes an adjustable set screw 60 which facilitates rotation of a foot supporting plate 54, corresponding to sagittal plane movement. The Stevens device allows internal and external whole leg rotation, once the foot is enclosed in the traction unit. There is no movement of any part of the foot relative to the leg and no means for movement of the foot in the frontal plane. Appendix B shows an annotated copy of Figure 9 of the Stevens patent to show the sagittal movement of the leg of this prior art. The movement disclosed in Stevens of the leg is in the sagittal plane and is fundamentally different from the movement of the foot in the frontal plane of the present invention as required in claim 11. Since there is no suggestive link between rotational and sagittal movement of the Stevens device with the movement in the present invention in the frontal plane, it would not be obvious for a man skilled in the art to arrive at the present invention from the Stevens patent.

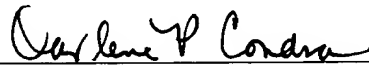
Claim 10 has now been amended to include the step of one of inverting and everting the member while the planar surface is in contact with the sole. The Stevens patent does not show or disclose the step of inverting or everting. Therefore, Claim 10 is believed to be allowable. The amendment to claim 10 should overcome the double patenting rejection.

Claim 20 has now been amended to include the step of first applying the planar surface of said member by pressure application and then tilting said member about the frontal plane while its planar surface is in contact with the sole of the foot. As stated supra., Stevens does not show or disclose tilting about the frontal plane. Therefore, claim 20 is believed to be allowable.

This amendment should place this case in condition for passing to issue. Such action is requested.

Respectfully submitted,

YOUNG & BASILE, P.C.

A handwritten signature in cursive script, reading "Darlene P. Condra", followed by a checkmark.

Darlene P. Condra
Attorney for Applicant(s)
Registration No. 37113
(248) 649-3333

3001 West Big Beaver Rd., Suite 624
Troy, Michigan 48084-3107

Dated: June 27, 2003
DPC/caod/dge